

slp Jan. 16

Work Order ID 78101

78101

Page 1

December-28-11 3:33:44 PM

Item ID: D3962-1KGY

Accept

N9000040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Rear Overhead Corner, LH

Start Date: 28/12/2011 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 16/01/2012 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals: Process Plan: M.L.J Date: 11/12/29 Tooling: _____ Date: _____

Run Start *NR1*

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
----------	--------------

D3962	A
-------	---

100

0.00

100

HandThermo

Memo

0.00

Hand Finishing Thermoforming

1-Cut Sheet to required Blank size

DL
12/01/06

105

0.00

105

HandThermo

Dry Material

Memo

0.00

Hand Finishing Thermoforming

Dry Sheet as per QSI022 KYDEX

Temp: 150°F

Time IN: 4:30 pm 12/01/05

Time OUT: 7:30 am 12/01/06

DL
12/01/06

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78101***78101***

Page 2

December-28-11 3:33:44 PM

Item ID: D3962-1KGY

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rear Overhead Corner, LH

Start Date: 28/12/2011 Start Qty: 1.00

1

Cust Item ID:

Required Date: 16/01/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

110

0.00

110


Thermoform

Memo

0.00

Thermoforming Machine

1-Machine Set-Up
2-Pre-heat Tool to required temp.
3-Thermoform as per Dwg and Folio #FTA061 using tool DT9341
Dwg Rev: A
Folio Rev: B


12/01/06

120

QC2- Inspect parts off machine FAI/FAIB

0.00

120

QC

Memo

0.00

Quality Control

Visually inspect part for proper formation and texture


12/01/06

130

QC8- Inspect parts - second check

0.00


130

QC

Memo

0.00

Quality Control


12/01/06

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

December-28-11 3:33:44 PM

Page 3

Setup Start *NS1*

Stop *NS2*

Cust Item ID:

Customer:

Reference:

Approvals: **Process Plan:** _____ **Date:** _____ **Tooling:** _____ **Date:** _____ **Run** **Start** ***NR1***
 QC: _____ **Date:** _____ **SPC (Y/N):** _____ **Date:** _____ **Stop** ***NR2***

140

140

HandThermo

Hand Finishing Thermoforming

Memo

1-Trim to finished dimensions as per Dwg

0.00

0.00

0.00

0.00

0.00

0.00

Tool ID

Tool #

**Plan
Code**

**Accept
Qty**

Reject
QtyReject
Number

**Insp.
Stamp**

150

150

QC

Quality Control

QC2- Inspect parts off machine FAI/FAIB

Memo

Complete FAI document

160

160

QC

Quality Control

QC5- Inspect part completeness to step on W/O

Memo

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 78101

78101

Page 4

December-28-11 3:33:44 PM

Item ID: D3962-1KGY

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Rear Overhead Corner, LH

Start Date: 28/12/2011 Start Qty: 1.00 ***1***

Cust Item ID:

Required Date: 16/01/2012 Req'd Qty: 1.00 ***1***

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
170	Identify as per dwg & Stock Location: _____	0.00							
170									
Packaging	Memo	0.00							
Packaging									
180	QC21- Final Inspection - Work Order Release	0.00							
180									
QC	Memo	0.00							
Quality Control									

12/1/16

12/1/16

ME
12-01-16

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

December-28-11 3:33:48 PM

Page 1

Work Order ID: 78101

78101

Parent Item: D3962-1KGY

D3962-1KGY

Parent Item Name: Rear Overhead Corner, LH

Start Date: 28/12/2011

Required Date: 16/01/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP RevA: New issue DD verified by:EC
Add Step 105 Dry Material 10/04/21 DL

IPP Rev B:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MKYD6185S.080-P3-52068		Purchased			No	100	sf	1,011.893	1	1			

MKYD6185S 080-P3-52068

Kydex steel grey

Location

therm

111807

119476

Loc Qty

1011.893107

10.4896282

1001.40348

Loc Code

DL
12/01/12

2.5 39 14

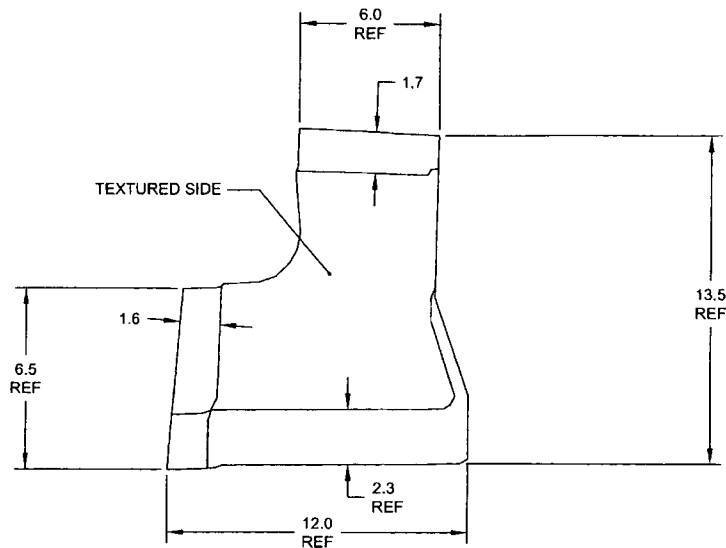
W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries



SHOW COPY
RETURN TO
ENGINEERING
UNCONTROLLED COPY
SUBJECT TO ADDITIONAL
WORK ORDER
NO. 78101-M.C.5
11/12/29

RELEASED
9/16/25/18

D3962-1 REAR OVERHEAD CORNER, LH

NOTES:

- 1) MATERIAL: SEE TABLE
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N (SEE TABLE) USING VIBRATING STYLUS
- 7) WEIGHT: 0.45 lbs
- 8) TOOLING: THERMOFORM PER MOLD DT9341 PER DART QSI 022. TRIM PER MOLD
- 9) MINIMUM THICKNESS: 0.035" UNLESS OTHERWISE NOTED

PART NUMBER	DESCRIPTION
D3962-1KIV	KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, IVORY #62015 (MKYD6185S.080-P3-62015)
D3962-1KGY	KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, STEEL GRAY #52068 (MKYD6185S.080-P3-52068)

A	NEW ISSUE	PH	09.06.18
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	09.06.18		
DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA DRAWING NO. D3962 REV. A SHEET 1 OF 2 TITLE REAR OVERHEAD CORNER (206 L3/L4) NTS SCALE COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

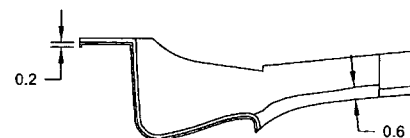
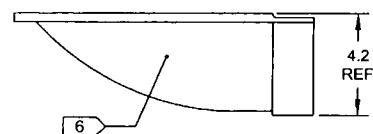
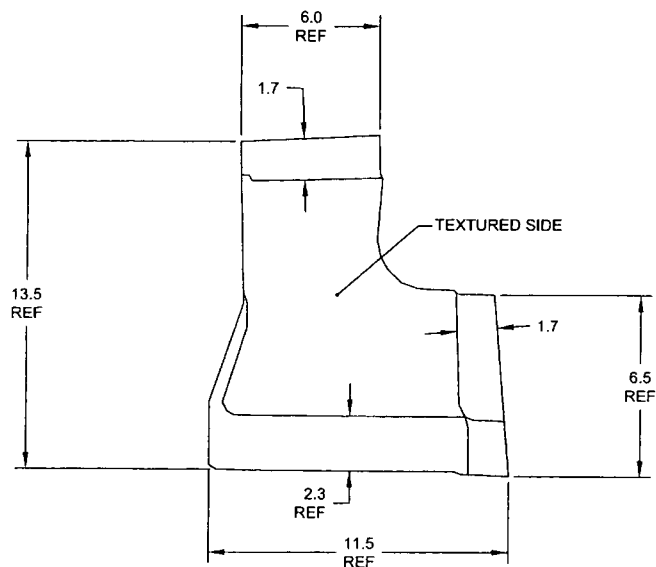
Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

78101



D3962-2 REAR OVERHEAD CORNER, RH

RELEASED
09/06/18

NOTES:

- 1) MATERIAL: SEE TABLE
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N (SEE TABLE) USING VIBRATING STYLUS
- 7) WEIGHT: 0.45 lbs
- 8) TOOLING: THERMOFORM PER MOLD DT9342 PER DART QSI 022. TRIM PER MOLD
- 9) MINIMUM THICKNESS: 0.035" UNLESS OTHERWISE NOTED

PART NUMBER	DESCRIPTION
D3962-2KIV	KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, IVORY #62015 (MKYD6185S.080-P3-62015)
D3962-2KGY	KYDEX 6185, 0.080 THICK, P3-VELOUR MATTE, STEEL GRAY #52068 (MKYD6185S.080-P3-52068)

DESIGN	RE/RH
DRAWN	RE/RH
CHECKED	RE/RH
MFG. APPR.	RE/RH
APPROVED	RE/RH
DE APPR.	RE/RH
DATE	09.06.18

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. D3962	REV. A SHEET 2 OF 2
TITLE REAR OVERHEAD CORNER (206 L3/L4) NTS	SCALE
COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

DART AEROSPACE LTD	Work Order: 78102
Description:	Part Number: D 3962-1K6Y
Inspection Dwg: D3962 Rev: A	Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST
THERMOFORMING SECTION

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than $\frac{1}{8}$ "	✓			
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

Measured by: <i>Wh</i>	Date: 12/01/06
-------------------------------	-----------------------

TRIMMING SECTION

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
13.5"	Ref.	13.5"	✓		TAPE DL-01	
12.0"	Ref.	12"	✓		TAPE DL-01	
6.5"	Ref.	7.0"	✓		TAPE DL-01	
6.0"	Ref.	7.5"	✓		TAPE DL-01	
1.6"	± 0.100	1.68"	✓		Ultr DL-02	
1.7"	± 0.100	1.78"	✓		Ultr DL-02	
0.035"	MIN.	0.067"	✓		ULTRA.	

Measured by: <i>DL</i>	Date: 12/01/12
-------------------------------	-----------------------

Audited by: <i>S</i>	Date: 12/01/15
-----------------------------	-----------------------

Preliminary Approval:	Date:
------------------------------	--------------

Rev	Date	Change	Revised by	Approved
B	10.04.14	Added preliminary approval	KJ	

10.04.14